

Docket No. Nemati-1

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Method And Apparatus To Enhance The Optical Transparency Of Biological Tissue

JS: 6/14/93

Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

| (Application Serial No) | (Filing Date) | (Status-patented, pending, abandoned) |
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| (Application Serial No) | (Filing Date) | (Status-patented, pending, abandoned) |
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I hereby appoint the following attorney with full power of substitution and revocation to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

JACK SCHUMAN (Registration No. 17,892)
 3762 Carmel Drive
 Carmel, Indiana 46033-4329
 Telephone: (317) 844-1302
 Facsimile: (317) 575-9223

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Babak Nemati
 Inventor's Signature *Babak Nemati* Date 10/19/98
 Residence Mercer County, New Jersey
 Citizenship Iran Post Office Address 5313 Town Court South, Lawrenceville, New Jersey 08876

Full name of second inventor, if any _____
 Inventor's Signature _____ Date _____
 Residence _____
 Citizenship _____ Post Office Address _____

Full name of third inventor, if any _____
 Inventor's Signature _____ Date _____
 Residence _____
 Citizenship _____ Post Office Address _____

Applicant or Patentee: Babak Nemati
Serial or Patent No.: _____ Docket No.: Nemati-1
Filed or Issued: _____
For: Method And Apparatus To Enhance The Optical Transparency
Of Biological Tissue

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(b)) - INDEPENDENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled Method And Apparatus To Enhance The Optical Transparency Of Biological Tissue described in

- ☒ [X] the specification filed herewith
☐ [] Application serial no. _____,
filed _____.
☐ [] Patent no. _____, issued _____.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ [X] no such person, concern, or organization
☐ [] person, concerns or organizations listed below*

NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME _____
ADDRESS _____
☐ [] Individual ☐ [] Small Business Concern ☐ [] Nonprofit
Organization

FULL NAME _____
ADDRESS _____
☐ [] Individual ☐ [] Small Business Concern ☐ [] Nonprofit
Organization

FULL NAME _____

ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Nonprofit
Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28 (b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Babak Nemati

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR


Signature of

Signature of

Signature of

Inventor

Inventor

Inventor

Date

Date

Date

10/19/98

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